

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Community Bankers Association of Illinois FedPac

ADDRESS (number and street) ▼

901 Community Drive

☐ Check if different than previously reported. (ACC)

Springfield

IL

62703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00291914

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert J. Wingert

Signature of Treasurer

Robert J. Wingert

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 15 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Community Bankers Association of Illinois FedPac

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2014</span>		23331.26
(b) Cash on Hand at Beginning of Reporting Period.....	26695.39	
(c) Total Receipts (from Line 19) .....	5471.29	9585.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	32166.68	32916.68
7. Total Disbursements (from Line 31) .....	13629.72	14379.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	18536.96	18536.96
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Community Bankers Association of Illinois FedPac

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 01 2014

To:

M M / D D / Y Y Y Y  
09 30 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3043.29

4268.25

(ii) Unitemized .....

2422.28

5299.86

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5465.57

9568.11

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

5465.57

9568.11

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

5.72

17.31

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

5471.29

9585.42

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

5471.29

9585.42

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3629.72	3629.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3629.72	3629.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13629.72	14379.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13629.72	14379.72

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5465.57	9568.11
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5465.57	9568.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	3629.72	3629.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	3629.72	3629.72

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. Jerry Cavanaugh**

Mailing Address 2304 Westchester Blvd

City State Zip Code  
 Springfield IL 62704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBAI

Occupation

Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.64

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.7935

Amount of Each Receipt this Period

10.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Jerry Cavanaugh**

Mailing Address 2304 Westchester Blvd

City State Zip Code  
 Springfield IL 62704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBAI

Occupation

Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.64

Date of Receipt

09 / 30 / 2014

Transaction ID : SA11AI.7947

Amount of Each Receipt this Period

10.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Kathleen Cook**

Mailing Address 856 Sparta Street  
 PO Box 325

City State Zip Code  
 St. Libory IL 62282

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Village Bank

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 20 / 2014

Transaction ID : SA11AI.7905

Amount of Each Receipt this Period

600.00

Baseball tickets

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

620.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

**A. Shawn Davis**

Mailing Address West Side Square

City State Zip Code  
 Carlinville IL 62626

FEC ID number of contributing federal political committee.

C

Name of Employer

Carlinville National Bank

Occupation

Bank Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.16

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 12 / 2014

Transaction ID : SA11AI.7898

Amount of Each Receipt this Period

300.00

Baseball Tickets

Full Name (Last, First, Middle Initial)

**B. James R Dingman**

Mailing Address PO Box 9

City State Zip Code  
 Orion IL 61273

FEC ID number of contributing federal political committee.

C

Name of Employer

BankOrion

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.60

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 22 / 2014

Transaction ID : SA11AI.7928

Amount of Each Receipt this Period

79.20

Travel Contribution

Full Name (Last, First, Middle Initial)

**C. John Dorsey**

Mailing Address 1155 S Elm Street

City State Zip Code  
 Staunton IL 62088

FEC ID number of contributing federal political committee.

C

Name of Employer

First National Bk of Staunton

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 22 / 2014

Transaction ID : SA11AI.7919

Amount of Each Receipt this Period

89.60

Travel Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

468.80

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. Larry Franklin**

Mailing Address 200 E Homer Adams Parkway

City State Zip Code  
 Alton IL 62002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Cornerstone Bank & Trust, N.A.

Occupation  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 04 / 2014

Transaction ID : SA11AI.7944

Amount of Each Receipt this Period

300.00

Baseball Tickets

Full Name (Last, First, Middle Initial)

**B. Todd Grayson**

Mailing Address 525 West Roosevelt Rd.

City State Zip Code  
 Chicago IL 60607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 South Central Bank

Occupation  
 EVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 22 / 2014

Transaction ID : SA11AI.7926

Amount of Each Receipt this Period

150.00

Travel Contribution

Full Name (Last, First, Middle Initial)

**C. Kraig Lounsberry**

Mailing Address 901 Community Drive

City State Zip Code  
 Springfield IL 62703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBAI

Occupation  
 SVP Governmental Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.13

Date of Receipt

09 / 29 / 2014

Transaction ID : SA11AI.7953

Amount of Each Receipt this Period

142.13

Travel Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

592.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. Chad Martin**

Mailing Address PO Box 105

City

Goodfield

State

IL

Zip Code

61742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Goodfield State Bank

Occupation

CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 31 / 2014

Transaction ID : SA11AI.7889

Amount of Each Receipt this Period

450.00

Baseball tickets

Full Name (Last, First, Middle Initial)

**B. Chad Martin**

Mailing Address PO Box 105

City

Goodfield

State

IL

Zip Code

61742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Goodfield State Bank

Occupation

CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

08 / 21 / 2014

Transaction ID : SA11AI.7913

Amount of Each Receipt this Period

150.00

Baseball Ticket

Full Name (Last, First, Middle Initial)

**C. Cindy Martin**

Mailing Address 915 S. Logan

City

Lena

State

IL

Zip Code

61048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lena State Bank

Occupation

VP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 22 / 2014

Transaction ID : SA11AI.7924

Amount of Each Receipt this Period

75.00

Travel Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

675.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

## **A. Brad Rensch**

Mailing Address 1515 Charleston Ave.  
PO Box 499

City State Zip Code  
Mattoon IL 61938-0499

FEC ID number of contributing  
federal political committee.

C

Name of Employer

First Mid-Illinois Bank

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.36

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 22 / 2014

**Transaction ID : SA11AI.7920**

Amount of Each Receipt this Period

87.36

Travel Contribution

Full Name (Last, First, Middle Initial)

## **B. David Schroeder**

Mailing Address 107 W Sheridan Place

City State Zip Code  
Lake Bluff IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBAI

Occupation

VP Federal Governmental Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.08

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2014

**Transaction ID : SA11AI.7885**

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. David Schroeder**

Mailing Address 107 W Sheridan Place

City State Zip Code  
Lake Bluff IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBAI

Occupation

VP Federal Governmental Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.08

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 21 / 2014

**Transaction ID : SA11AI.7912**

Amount of Each Receipt this Period

150.00

Baseball Ticket

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

287.36

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. David Schroeder**

Mailing Address 107 W Sheridan Place

City State Zip Code  
 Lake Bluff IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBAI

Occupation

VP Federal Governmental Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.08

Date of Receipt

08 / 29 / 2014

**Transaction ID : SA11AI.7940**

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

**B. David Schroeder**

Mailing Address 107 W Sheridan Place

City State Zip Code  
 Lake Bluff IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBAI

Occupation

VP Federal Governmental Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.08

Date of Receipt

09 / 30 / 2014

**Transaction ID : SA11AI.7951**

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Robert J. Wingert**

Mailing Address 901 Community Drive

City State Zip Code  
 Springfield IL 62703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Community Bankers Association of IL

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.04

Date of Receipt

08 / 22 / 2014

**Transaction ID : SA11AI.7917**

Amount of Each Receipt this Period

300.00

Baseball ticket

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

3043.29

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City	State	Zip Code
Fort Worth	TX	76155

Purpose of Disbursement  
Schroeder CC - Leg. Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2014

Transaction ID : SB21B.7901

Amount of Each Disbursement this Period

458.00
--------

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City	State	Zip Code
Fort Worth	TX	76155

Purpose of Disbursement  
Schroeder CC - Leg. Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

Transaction ID : SB21B.7987

Amount of Each Disbursement this Period

25.00
-------

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City	State	Zip Code
Fort Worth	TX	76155

Purpose of Disbursement  
Schroeder CC - Leg. Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

Transaction ID : SB21B.7999

Amount of Each Disbursement this Period

25.00
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

508.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. CBAI**

Mailing Address 901 Community Drive

City	State	Zip Code
Springfield	IL	62703

Purpose of Disbursement  
July Postage/August Admin Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2014

**Transaction ID : SB21B.7939**

Amount of Each Disbursement this Period

753.84
--------

Full Name (Last, First, Middle Initial)

**B. CBAI**

Mailing Address 901 Community Drive

City	State	Zip Code
Springfield	IL	62703

Purpose of Disbursement  
Aug. Postage/Sept. Admin Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : SB21B.7957**

Amount of Each Disbursement this Period

382.20
--------

Full Name (Last, First, Middle Initial)

**C. Marriott Marquis**

Mailing Address 901 Massachusetts Ave. NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement  
Schroeder C C- Leg. Meetings/Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

**Transaction ID : SB21B.8005**

Amount of Each Disbursement this Period

1022.75
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2158.79
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2666.79
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. BILL FOSTER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Mailing Address P.O. BOX 9104

City	State	Zip Code
AURORA	IL	60598

**Transaction ID : SB23.7970**Purpose of Disbursement  
Event

011

Amount of Each Disbursement this Period

500.00
--------

Candidate Name

**DUCKWORTH FOR CONGRESS**Category/  
Type

Office Sought:



House

Disbursement For: 2014



Primary



General



Senate



Other (specify) ▼



President

State: IL

District: 08

Full Name (Last, First, Middle Initial)

**B. DUCKWORTH FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Mailing Address P.O. BOX 59568

City	State	Zip Code
SCHAUMBURG	IL	60159

**Transaction ID : SB23.7960**Purpose of Disbursement  
Event

011

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**DUCKWORTH FOR CONGRESS**Category/  
Type

Office Sought:



House

Disbursement For: 2014



Primary



General



Senate



Other (specify) ▼



President

State: IL

District: 08

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF CHERI BUSTOS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Mailing Address P.O. BOX 77

City	State	Zip Code
EAST MOLINE	IL	61244

**Transaction ID : SB23.7959**Purpose of Disbursement  
Event

011

Amount of Each Disbursement this Period

500.00
--------

Candidate Name

**FRIENDS OF CHERI BUSTOS**Category/  
Type

Office Sought:



House

Disbursement For: 2014



Primary



General



Senate



Other (specify) ▼



President

State: IL

District: 17

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. KINZINGER FOR CONGRESS**

Mailing Address PO BOX 2365

City	State	Zip Code
OTTAWA	IL	61350

Purpose of Disbursement  
Event

011

Candidate Name

**KINZINGER FOR CONGRESS**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

**Transaction ID : SB23.8011**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. QUIGLEY FOR CONGRESS**

Mailing Address PO BOX 13040

City	State	Zip Code
CHICAGO	IL	60613

Purpose of Disbursement  
Event

011

Candidate Name

**QUIGLEY FOR CONGRESS**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

**Transaction ID : SB23.8014**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. RANDY HULTGREN FOR CONGRESS**

Mailing Address PO BOX 717

City	State	Zip Code
ST CHARLES	IL	60174

Purpose of Disbursement  
Event

011

Candidate Name

**RANDY HULTGREN FOR CONGRESS**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

**Transaction ID : SB23.7972**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Community Bankers Association of Illinois FedPac**

Full Name (Last, First, Middle Initial)

**A. ROBIN KELLY FOR CONGRESS**

Mailing Address PO BOX 6953

City	State	Zip Code
CHICAGO	IL	60680

Purpose of Disbursement  
Event

011

Candidate Name

**ROBIN KELLY FOR CONGRESS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

**Transaction ID : SB23.8016**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City	State	Zip Code
TAYLORVILLE	IL	62568

Purpose of Disbursement  
Event

011

Candidate Name

**RODNEY FOR CONGRESS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2014

**Transaction ID : SB23.7941**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. ROSKAM FOR CONGRESS COMMITTEE**

Mailing Address P. O. BOX 713

City	State	Zip Code
WHEATON	IL	60187

Purpose of Disbursement  
Event

011

Candidate Name

**ROSKAM FOR CONGRESS COMMITTEE**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

**Transaction ID : SB23.8021**

Amount of Each Disbursement this Period

500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

**A. SCHOCK FOR CONGRESS**

Mailing Address PO Box 10555

City	State	Zip Code
Peoria	IL	61612

Purpose of Disbursement  
Event

011

Candidate Name

SCHOCK FOR CONGRESS

Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2014

Transaction ID : SB23.8022

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. JOHN M M SHIMKUS**

Mailing Address 504 Sumner Boulevard

City	State	Zip Code
Collinsville	IL	62234

Purpose of Disbursement  
Event

011

Candidate Name

JOHN M M SHIMKUS

Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2014

Transaction ID : SB23.8023

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00
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10000.00
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